FORM **PA-20-B** 

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

# UTILITY PROPERTY TAX INFORMATION UPDATE RSA 83-F (NON-FERC REGULATED UTILITIES)

FOR	DRA	LISE	ONLY	

DUE ON OR BEFORE JUNE 1, 2006

STEP 1 OWNERSHIP IDENTIFICA- TION	1 Please check one Corporation Partnership Individual (Sole Proprietor)  2 Federal Employer Identification Social Security Number  3 Name of Utility: 4 Name of Owner (If different that 5 Billing Address 6 City/State, Zip Code 7 Contact Person 9 FAX Number	Numberan name of Utility)	Sion Other (sp			
STEP 2 POLLUTION CONTROL EXEMPTION	If you wish to claim air and/or wat Department of Revenue Form PA- Services. If you do not have Forr office by calling the Property App	er pollution control exemption(s) 20E and include a copy of the exm PA-20E, you may visit our web raisal Division at (603) 271-268	as described in RSA 72:12 cemption letter from New Ha site at <u>www.nh.gov/revenu</u> 7.	e-A, please of the property to	complete and submit to the epartment of Environmental ax/index.htm or contact this	
STEP 3 ANTICIPATED CHANGES	List below anticipated events (intinfluence on future operations, in		al and market-related) and	or issues t	hat may have a significant	
STEP 4 RATE AGREEMENTS (If applicable)	Attach a summary of the contract beginning date, termination date, any discussions wherein purchase	contract "rate" amount (including	any expected changes in ra	ate, and tim	ing). If you are engaged in	
STEP 5	PERIOD ENDING (CHECK ONE):	DECEMBER 31, 2005	or APRIL 1, 2006			
TOTAL (COMPANY) ASSET INFORMATION	TOTAL ORIGINAL COST EVER Of Construction (CIAC), if applica TOTAL ORIGINAL COST IN NEI In Aid Of Construction, if applica TOTAL NON-TAXABLE PROPE Non-Realty Items). An Itemize TOTAL NET BOOK VALUE EVE Of Construction, if applicable).  TOTAL NET BOOK VALUE IN NI In Aid Of Construction, if application application is application.	YWHERE - (Without Nuclear Fuel cable. W HAMPSHIRE - (Without Nuclear Sable) ERTY - (Personalty, Such as Furled List by Category Is Required List by Category Is R	But Including Contributions ar Fuel But Including contributions ar Fuel But Including contribution area.	In Aid \$ utions \$ Other \$ In Aid \$		
	CAPITAL STRUCTURE BREAK	DOWN				
	Long Term Debt Preferred Stock			\$		
				\$		
	Common Equity \$  Total Capital \$					
	DESCRIPTION	BOOK VALUE	DESCRIPTION	214.0)	BOOK VALUE	
	Utility Plant in Service  Accumulated Depreciation	\$	Contrib. In Aid of Const. (C		\$	
		\$	Accumulated Depreciation	I UI CIAC	\$	
	Materials & Supplies	\$	Fuel Stocks		\$	

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STEP 6 PRODUCTION	OPERATIONAL STATISTICS	2000	2001	2002	2003	2004	2005
AND FINANCIAL DETAIL	Total Output Produced During Year						
	Total Income - Utility Only	\$	\$	\$	\$	\$	\$
	EXPENSES - UTILITY ONLY Management Salaries & Fees	\$	\$	\$	\$	\$	\$
	Admin/Legal/Accounting Fees	\$	\$	\$	\$	\$	\$
	Payroll & Payroll Taxes	\$	\$	\$	\$	\$	\$
	Real Estate Taxes	\$	\$	\$	\$	\$	\$
	Property Insurance	\$	\$	\$	\$	\$	\$
	Utilities	\$	\$	\$	\$	\$	\$
	Repair & Maintenance	\$	\$	\$	\$	\$	\$
	Depreciation	\$	\$	\$	\$	\$	\$
	Amortization	\$	\$	\$	\$	\$	\$
	Corporate Income Taxes	\$	\$	\$	\$	\$	\$
	Other (Explain)	\$	\$	\$	\$	\$	\$
	Total Expenses - Utility Only	\$	\$	\$	\$	\$	\$
	Net Operating Income	\$	\$	\$	\$	\$	\$

FORM

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STEP 7 BREAK-		NAME OF FACILITY	TOWN/ LOCATION	MAP/LOT	YEAR BUILT	YEAR LAST REFURBISHED	RATED TOTAL CAPACITY	ORIGINAL COST	NET BOOK VALUE
DOWN OF ASSETS	1								
INCLUDE CIAC	2								
	3								
	4								
	5								
	6								
	7								
	8								
	9								
	10								
	11								
	12								
	13								
	14								
	15								
	16								
	17								
	18								
	19								
	20								
	21								
	22								
	23								
	24								
	25								

**CERTIFICATION:** I hereby certify under penalties of perjury that the information provided on the accompanying pages, is correct, and accurate to the best of my belief and knowledge, and that I am authorized to submit this report on behalf of the utility property owner and/or operator named herein.

SIGNATURE (IN INK)	DATE

TITLE

NH DEPT OF REVENUE ADMINISTRATION MAIL UTILITY APPRAISER

TO: PO BOX 487

CONCORD, NH 03302-0487



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INSTRUCTIONS

WHO SHOULD FILE	RSA 83-F:4 defines "Persons Liable" as follows: The tax imposed by this chapter shall be assessed upon each utility owning or possessing utility property. If an owner of utility property has filed an election pursuant to RSA 83-F:5, II, the tax imposed by this chapter shall be assessed upon each person with an ownership interest in utility property, in the proportion that such person's ownership interest bears to the entirety of the ownership in the property.
FILING DATE	The completed form is DUE ON OR BEFORE June 1, 2006.
STEP 1	Check the box that indicates the type of ownership. Give either the Federal Employer Identification Number or the Social Security Number that applies, the name of the Utility, the owner and mailing address. List the contact person, the phone number, the fax number and an e-mail address.
STEP 2	If filing for pollution control exemption, submit the Department's Form PA-20E and a copy of the exemption letter from the New Hampshire Department of Environmental Services.
STEP 3	Please give any information known to the taxpayer that might lead to a significant change in the Utility's future operations, financial or otherwise.
STEP 4	Please provide the required information about any existing rate agreements
STEP 5	Provide the information request. This enables the Utility Appraiser to isolate the taxable property in New Hampshire.
STEP 6	Please input the production and financial performance information applicable to Utility property only.
STEP 7	Provide a detailed itemization of the assets for each location (by municipality), including: Name, Location, map/lot number, year structure was built (original year of construction), year last refurbished (most recent year of significant refurbishment), Rated total ("theoretical") output capacity, original cost and net book value.
SIGNATURE AND TITLE	Authorized individual must sign in ink and date before mailing. Also include the title of person signing.